

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Maureen M. Beach</p> <hr/> <p>Mailing Address 1901 Wyoming Avenue NW Apt. 67</p> <hr/> <p>City Washington State DC Zip Code 20009</p> <hr/> <p>Purpose of Disbursement Salary</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D427280</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 9</div> <div>3 0</div> <div>2 0 1 0</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period <div>16493.93</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) First Data</p> <hr/> <p>Mailing Address 6200 S Quebec St</p> <hr/> <p>City Greenwood Village State CO Zip Code 80111-4729</p> <hr/> <p>Purpose of Disbursement Merchant Service Fees</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D427630</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 9</div> <div>0 2</div> <div>2 0 1 0</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period <div>950.06</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <hr/> <p>Mailing Address 3060 Williams Drive Suite 200</p> <hr/> <p>City Fairfax State VA Zip Code 22031</p> <hr/> <p>Purpose of Disbursement Insurance</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D422670</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 8</div> <div>3 0</div> <div>2 0 1 0</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period <div>24.62</div> </p>

SUBTOTAL of Disbursements This Page (optional)

17468.61

TOTAL This Period (last page this line number only)